Anna

Duncan Hamilton hamiltongeologicalservices@gmail.com

Monday, January 04, 2016 10:03 AM

Miller, Anna 'Peter Bilodeau'

bject: .tachments: RE: Energex Application for Lanphar 1-12, (EPA UIC draft # MI-125-2R-0003)

Energex_Bonding.pdf

Hi Anna:

Please find attached the bond documents. Note the bonding was done in 2 phases. First phase a total of \$125,000 was posted for:

Lanphar 1-12

Lanphar 2-12

Lanphar 3-12

Lanphar 7-12

Morris 4-12

Then the second phase was in 2014 and the bond was topped up to \$250,000 full blanket bond to cover an additional four wells:

Stolz 2-24 Marcinkiewicz 2-24 Ross Unit 1-31 Jones Unit 1-30.

Hopefully this is what you are after. I apologize for the poor scanning on some of the pages.

Regards

Duncan

From: Miller, Anna [mailto:miller.anna@epa.gov]

Sent: December-22-15 12:58 PM

To: Duncan Hamilton

Subject: RE: Energex Application for Lanphar 1-12, (EPA UIC draft # MI-125-2R-0003)

Duncan:

I received the additional information of the Lanphar 1-12 on 11/25/15 well. Part of EPA's review involves assessing potential impacts to sites of historical significance. Therefore, as part of the process, EPA send a routine request for information to the State Historical Preservation Office (SHPO) in Michigan. We generally receive a response from the SHPO in 4-6 weeks.

On another matter, EPA asked for a copy of the State bond that Energex is using for financial assurance for the cost of plugging. The original application included only a screenshot of a bond page, apparently from a Michigan agency system. Your additional information included the same screenshot page. EPA needs a copy of the actual bond

document, however, as signed by the Guarantor and the State /Company as appropriate. A computer screen shot is not sufficient for our records.

Please call me if you have any questions. After today, I will be out of the office until December 30.

Best regards,

Anna

Anna Miller | Environmental Scientist | UIC Branch | EPA Region 5 | 312-886-7060

From: Duncan Hamilton [mailto:hamiltongeologicalservices@gmail.com]

Sent: Monday, October 26, 2015 11:58 AM To: Miller, Anna <miller.anna@epa.gov>

Subject: RE: Energex Application for Lanphar 1-12, (EPA UIC draft # MI-125-2R-0003)

Hi Anna:

Most appreciate your update.

Regards

Duncan

From: Miller, Anna [mailto:miller.anna@epa.gov]

Sent: October-26-15 12:51 PM

To: Duncan Hamilton

Subject: RE: Energex Application for Lanphar 1-12, (EPA UIC draft # MI-125-2R-0003)

Good morning, Duncan:

We have in fact requested some additional information via letter to your company. We tend to request information via mail if the additional information we need requires authorized company signatures or is financial in nature. You may not have yet received the letter – we send it via certified return receipt, and I haven't received the receipt yet – but here is a pdf copy. If you have any questions, please email or call me.

Best regards,

Anna

Anna Miller
Environmental Scientist
Underground Injection Control Branch
U.S. EPA Region 5 (WU-16J)
77 W. Jackson
Chicago, IL 60604
(312) 886-7060

Deg

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY - OFFICE OF GEOLOGICAL SURVEY

| REQUEST FOR TRA | NSFER OF PERMIT | Permit number 32579 | Well type Co | urrent true vertical depth |
|--|---|---------------------------|---|---|
| | | Well name and num | 1 | 210 |
| Required by authority of Part 615: | Supervisor of Wells or Part 625 | Morris 4-12 | nei | |
| Mineral Wells, Act 451 PA 1994 as a falsification of this information may re | Imenoed. Non-submission and/or | Surface location | | |
| - | sait in lines and/or imprisonment. | 1 | | |
| Part 615 Oil/Gas Well | F*** | NW 1/4 SE | 1/4 NE 1/4 Sec | tion 12 T5N R11 |
| ™ Fall p10 Oll/Gas vvel | Part 625 Mineral Well | Township | Cour | |
| NOTE, CRAINER F | | Addison | Oak | land |
| NOTE: Eligibility for permits is condition not be transferred to persons not in conconditions at the well site until compliar. This permit does not convey proper private or public rights nor does it were not convey to the private of public rights nor does it were not convey private or public rights nor does it were not convey private or public rights nor does it were not convey to the nor does not convey to the nor do | nce is achieved. The acquiring permi | ittee shall attach a curn | he Department of Enviror ermittee is under notice t ent Organization Report (| nmental Quality. Permits sha pecause of unsatisfactory EQP 7200-13) |
| · · | TDANCED OF | T A FIFTHEREN WOODA | a combining with other | state statutes. |
| Name(s) of Selling Permittee(s) | TRANSFER OF | A PERMIT FROM: | | |
| Onco Petroleum USA, Inc. | | | | d. I.D.# ar S.S.# |
| Address: Number and Street, City or To | NAME State ZID Code Tolerham | · | 13 | 4280793 |
| 301 E. First Street., Ste. 300, Im | May City 141 to 44 to 44 | | | |
| Thor Order, Ste. 300, In | lay City, Mil 4844-1311 | | | |
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| All possite rights and | | | | |
| All permits rights and responsibilities are | discharged by: | | —————————————————————————————————————— | |
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| Permittee | Authorized representative | name | Signature | |
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| Permittee | Authorized representative | name | Signature | Date |
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| nergex Petroleum(USA) LLC | | * | reu, | 1.D.# or S.S.# |
| ddress: Number and Street, City or Tow | n, State, ZIP Code | | <u>98-</u> | 1088967 |
| 06 East Ash. Mason. Michigan. | | | Telep | phone |
| 2 2001 ISD. Wason, Whohuan, 2 | +0004 | | 51,9- | -252-1800 |
| le are) (I am) so owner or suthorized as | | | | |
| le are) (I am) an owner or authorized re andonment in conformity with the law, o | presentative of the owner of the well | under this permit and a | ssume full responsibility f | or the drilling operation, and |
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| ☐ Statement of Financial Re | esponsibility | | 1 | |
| permittee rights and responsibilities are | assumed by: | , | / // | |
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| ergex Petroleum (USA) LLC | Data Dila d | /, | 11/1 | 1. / |
| Permittee | Peter Bilodeau | 15 | W U | - 2/19/2012 |
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| Permittee FC | Authorized representative na DR DEPARTMENT OF ENVIRON | MENTAL QUALITY | USE ONLY Distribution 2013 | by DEQ |
| Permittee FC | Authorized representative na | | USE ONLY / Distribution | by DEQ |
| Permittee FC | Authorized representative na DR DEPARTMENT OF ENVIRON | MENTAL QUALITY | USE ONLY Distribution 2013 | by DEQ |

ACCEPTANCE OF CERTIFICATE OF DEPOSIT AS SINGLE WELL CONFORMANCE BOND By authority of Part 615, Supervisor of Wells, Act 451 PA 1994, as amended.

CERTIFICATE OF DEPOSIT REQUIREMENTS FOR OIL WELL BONDS To the financial institution: The financial institution will supply its own Certificate of Deposit (CD). By signature below, the bank's issuing officer certifies that the Certificate has been issued according to the following requirements:

- The CD must be in the sole name of: State of Michigan, Supervisor of Wells, Department of Environmental Quality No other name may be connected with the certificate as beneficiary, payee, in care of, joint tenant, etc.
- The account should show the State of Michigan Federal Tax Identification Number 38-6000134 and no other.
- In order to comply with the USA Patriot Act, authorized delegates of the Supervisor of Wells can sign and return signature cards or account cards if delivered to them. However, Department employees cannot furnish their Social Security number. An alternative identification number such as employee identification number must be utilized. The customer shall not sign signature cards or

| 8. The Department of Environmental Quality is the sole beneath authorized exclusively by the Department through writter 9. All customer documents relating to the CD should be provided 10. Questions regarding these requirements may be FINANCIAL INSTITUTION CERTIFICATION 3851- | the returned to the permittee by the Department. o the IRS under the applicant's Federal ID Number. arned on this certificate, All statements should be sent to the address below efficiary of the account. Redemption and disposition is to be instructions on Department letterhead. d to the Department. |
|--|--|
| "I state that Certificate of Deposit # Comerica Bank | issued by |
| | has been issued according to the instructions listed above." |
| Issuing officer's name Sharon R Taylor | Address of financial institution |
| Title Vice President | |
| Signature Matton Rayfor | |
| Date 02/12/13 | |
| To the permittee: Fill in the blanks below with the permittee's name, Cer and number. Sign and date where indicated. By signature below, the particle agreed between the State of Michigan, Department of E | fies accept the following agreement: Environmental Quality and |
| Deposit # $\frac{385111203522}{BAJK}$ in the amount of \$\frac{25}{3}\$ | Í |
| Supervisor of Wells, Department of Environmental Quality, is SUPERVISOR OF WELLS, 1994 PA 451, as amended, Sec | the name of and for the benefit of the State of Michigan, is accepted as a conformance bond required by PART 615 clion 324.61506(p) for the well known as **LERMIT # 39257 |
| LANDHAR, MELVIN F. 7-12 and shall be available bond is required. It is the express intent of the parties that the conformance bond. It is further agreed that the Certificate of manner as a conformance bond. The permittee retains the Deposit. | he Certificate of Deposit is a substitute for the filing of a of Deposit is subject to forfeiture, claim or return in like |
| By Date FO 1/2/13 Permittee's Authorized Signature | |
| Permittee's Federal ID Number 98-1098967 | |

Enclose with CD and submit to: Office of Oil, Gas, and Minerals, Michigan Department of Environmental Quality, P.O. Box 30256, Lansing, MI 48909-7756.

DEQ

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY - OFFICE OF GEOLOGICAL SURVEY

| | , | Permit number | 1 | Current true vertical depth |
|--|--|---|---|--|
| REQUEST FOR TRAI | NSFER OF PERMIT | 32168 | <u> </u> | 4339' |
| Required by authority of Part 615 Si | upervisor of Wells or Part 625 | Well name and numb Lanphar, Melivn F | | |
| Mineral Wells, Act 451 PA 1994 as an | nended. Non-submission and/or | Surface location | 1+1X | |
| falsification of this information may res | rur in intes anmoi itubulsoumeur | NW 1/4 SW : | 1/4 SE 1/4 S | ection 12 T 5N R 11E |
| Part 615 Oil/Gas Well | Part 625 Mineral Well | Township | | ection 12 T 5N R 11E |
| | | Addison | Oa | akland |
| NOTE: Eligibility for permits is condition not be transferred to persons not in comconditions at the well site until compliant. This permit does not convey propert private or public rights nor does it was | pliance. A permit for a well shall no se is achieved. The acquiring permit sy rights in either real estate or ma | t be transferred if the pe ttee shall attach a curre rterial nor does it auth | ermittee Is under notice nt Organization Repor orize any injury to pr | because of unsatisfactory of (EQP 7200-13) Tvate property or invasion of |
| bloma/a) of Calling Damittan/a) | TRANSFER OF | A PERMIT FROM: | | |
| Name(s) of Selling Permittee(s) Onco Petroleum USA, Inc. | | | | Fed. I.D.# or S.S.# |
| Address: Number and Street, City or Tov | wn State ZIP Code Telephone | | | 134280793 |
| 301 E. First St., Ste. 300, Imlay 0 | | | | |
| Total Little out | NICES TALL AND A SEAS. THE ! I | | | |
| All permits rights and responsibilities are | discharged by: | *** | | |
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| Permittee | Authorized representative | name | Signature | Date |
| Permittee | Authorized representative | name | Signature | Date |
| Permittee | Authorized representative | name | Signature | Date |
| Name(s) of Acquiring Permittee(s): | TRANSFER O | F A PERMIT TO: | | |
| , , , | ¥ | | | ed. I.D.# or S.S.# |
| Energex Petroleum (USA) LLC Address: Number and Street, City or Tow | n, State: ZIP Code | | | 28-1088967 elephone |
| 106 East Ash. Mason, Michigan, 4 | 48854 | | | 19-252-1800 |
| (We are) (I am) an owner or authorized re abandonment in conformity with the law, r | presentative of the owner of the well egulations and orders. | under this permit and a | assume full responsibil | lity for the drilling, operation, and |
| BOND: Single Weil Attact Blanket On Fil Statement of Financial R All permittee rights and responsibilities are | le Bond Number 385 esponsibility | | Amount 25 | 000 22 |
| Energex Petraleum (USA) LLC Permittee | Peter Bilodeau Authorized representative | name (#W) | Signature | 2/19/2013 |
| Permittee } | Authorized representative r | name | Signature | Date |
| Permittee | Authorized representative r | name | Signature | Date |
| | OR DEPAR MENT OF ENVIRO | NMENTAL QUALIT | | |
| | | alia | / | oution by DEQ |
| Approved | | | | nsing Selling Owner |
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| QP 7200-7 (rev. 8/2004) Mail Orlginal | and 3 conies to: OFFICE OF GR | FOLOGICAL SURVEY | | |

OFFICE OF GEOLOGICAL SURVEY
MICHIGAN DEPT-OF ENVIRONMENTAL QUALITY
PO BOX 30256
LANSING-MI 48909-7756

By authority of Part 615, Supervisor of Wells, Act 451 PA 1994, as amended. CERTIFICATE OF DEPOSIT REQUIREMENTS FOR OIL WELL BONDS To the financial institution: The financial institution will supply its own Certificate of Deposit (CD). By signature below, the bank's issuing officer certifies that the Certificate has been issued according to the following requirements: The CD must be in the sole name of: State of Michigan, Supervisor of Wells, Department of Environmental Quality No other name may be connected with the pertificate as beneficiary, payee, in care of, joint tenant, etc. The account should show the Stale of Michigan Federal Tax Identification Number 38-6000134 and no other. In order to comply with the USA Patriot Act, authorized delegates of the Supervisor of Wells can sign and return signature cards or account cards if delivered to them. However, Department employees cannot furnish their Social Security number. An atternative identification number such as employee identification number must be utilized. The customer shall not sign signature cards or account cards. The meturity date shall not be less than one (1) year. The certificate shall be automatically renewable. interest must be paid by check at maturity. The interest will be returned to the permittee by the Department. The Department will report interest earned on the certificate to the IRS under the applicant's Federal ID Number, Your financial institution must provide 1099-INT for interest earned on this certificate. All statements should be sent to the address below. The Department of Environmental Quality is the sole beneficiary of the account. Redemption and disposition is to be authorized exclusively by the Department through written instructions on Department letterhead. All customer documents relating to the CD should be provided to the Department. Questions regarding these requirements may be addressed to Permits and Bonding Unit at (517) 241-1528. FINANCIAL INSTITUTION CERTIFICATION "I state that Certificate of Deposit # 3851-1120282-1 issued by Comerica Bank has been issued according to the instructions listed above." Address of financial institution Sharon R Taylor Issuing officer's name Vice President Title Signature Date ACCEPTANCE OF CERTIFICATE OF DEPOSIT AS CONFORMANCE BOND To the permittee: Fill in the blanks below with the permittee's name, Certificate of Deposit (CD) number, CD amount, bank name, and well game and number. Sign and date where indicated. By signature below, the parties accept the following agreement: It is agreed between the State of Michigan, Department of Environmental Quality and ENERGEY hereafter the permittee, that Certificate of, Deposit # 385111202821 in the amount of \$ 25.000 issued by ComeRic A in the name of and for the benefit of the State of Michigan, Supervisor of Wells, Department of Environmental Quality, is accepted as a conformance bond required by PART 615 SUPERVISOR OF WELLS, 1994 PA 451, as amended, Section 324.61506(p) for the well known as PERMIT #32168 LAN PHAR, Melvin F. 1-12 and shall be available to the State of Michigan for all purposes for which the bond is required. It is the express intent of the parties that the Certificate of Deposit is a substitute for the filing of a conformance bond. It is further agreed that the Certificate of Deposit is subject to forfeiture, claim or return in like manner as a coproringnce bond. The permittee retains the right to any and all interest accruing to the Certificate of Deposit. Permittee Michigan Department of Environmental Quality Ву Permittee's Authorized Signature DEQ Authorized Signature

Enclose with CD and submit to: Office of Oit, Gas, and Minerals, Michigan Department of Environmental Quality, P.O. Box 30256, Lansing, MI 48909-7756.

Permittee's Federal ID Number 78 - 1088967

| | | Permit number | Minithme | | |
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| REQUEST FOR TRA | NSFER OF PERMIT | 32366 | Well type Oil | Current true | vertical depth |
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| Required by authority of Part 615 | Supervisor of Wells or Part 625 | 1 | | | |
| Mineral Wells, Act 451 PA 1994 as falsification of this information may n | amended Non-submission and/or | Lanphar, Melivi | 01 F" Z=1Z | <u>-</u> | |
| | asout in lines and/or imprisonment, | | 1 44 65 | | |
| Part 615 Oil/Gas Well | Day one late - Hall | | <u>/ 1/4 SE 1</u> | 14 Section 12 | T5N R11E |
| EN PEROTO CHACES MACH | Part 625 Mineral Well | Township Addison | | County | |
| NOTE: Eligibility for permits is condition not be transferred to persons not in conditions at the well site until compile This permit does not convey propertivate or public rights nor does it v | nce is achieved. The acquiring perments rights in either real estate or m | es, rules and orders or ot be transferred if the nittee shall attach a cu | r permittee is under i irrent Organization R | notice because of Report (EQP 7200- | unsatisfactory 13) |
| Name/s) of Sollier Results a/s) | TRANSFER O | F A PERMIT FROM | 1; | | |
| Name(s) of Selling Permittee(s) | • | | | Fed. I.D.# or | S.S.# |
| Onco Petroleum USA, Inc. | | | | 134280793 | } |
| Address: Number and Street, City or T 301 E. First St., Ste. 300, Imlay | own, State, ZIP Code Telephone | | | | |
| All permits rights and responsibilities ar | | · | | | |
| Permittee | Authorized representative | e näme | Signat | ure | Date |
| Permittee | Authorized representative | e name | Signat | ure | Date |
| Pennittee | Authorized representative | | Signate | ure | Date |
| Name(s) of Acquiring Permittee(s): | TRANSFER C | OF A PERMIT TO: | · | | |
| - ' ' | | | | Fed, I.D.# or S | .S.# |
| Energex Petroleum (USA) LLC Address: Number and Street, City or To | MET State 71P.Code | | | 98-1088967 | |
| | · | | | Telephone | |
| 106 East Ash. Mason. Michidan. | 48854 | | | 519-252-180 | 00 |
| We are) (I am) an owner or authorized rabandonment in conformity with the law, | epresentative of the owner of the well regulations and orders. | under this permit and | d assume full respor | nsibility for the drill | ing, operation, and |
| BOND: ⊠ Single Well ☐ Attac | ched Surety or Bank <u>Conm</u> | nerica Bank | | | |
| 國 Blanket ☐ On F | | 1-1120281-3 | Amount 52 | 5.006.00 | |
| ☐ Statement of Financial F | | 1.77-1,0-9 | - mount fa | 77.00 | |
| all permittee rights and responsibilities a | re assumed by: | | 1 1/2 | | |
| . , , , , , , , , , , , , , , , , , , , | , · | | [LL] | | . / |
| Energex Petroleum (USA) LLC | Date - Dif - 3 | / | 11/1 | | 2/10/- |
| Permittee | Peter Bilodeau Authorized representative | name 🧳 | Signatur | re | X/ 17/2013 Date |
| Permittee | Authorized representative | name | Signatur | re | Date |
| | • | | k | | |
| Permittee | Authorized representative r | | , Signatur | e | Date |
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| 2P 7200-7 (rev. 8/2004) Mail Origina | and 3 copies to: OFFICE OF GE | OLOGICAL SURVEY | / | | |

By authority of Pari 615, Supervisor of Wells, Act 451 PA 1994, as amended. CERTIFICATE OF DEPOSIT REQUIREMENTS FOR OIL WELL BONDS To the financial institution: The financial institution will supply its own Certificate of Deposit (CD). By signature below, the bank's issuing officer certifies that the Certificate has been issued according to the following requirements: The CD must be in the sole name of: State of Michigan, Supervisor of Wells, Department of Environmental Quality No other name may be connected with the certificate as beneficiary, payee, in care of, joint tenant, etc. The account should show the State of Michigan Federal Tax Identification Number 38-5000134 and no other. In order to comply with the USA Patriot Act, authorized delegates of the Supervisor of Wells can sign and return signature cards or account cards if delivered to them. However, Department employees cannot furnish their Social Security number. An alternative identification number such as employee identification number must be utilized. The customer shall not sign signature cards or account cards. The maturity date shall not be less than one (1) year. The certificate shall be automatically renewable. interest must be paid by check at maturity. The interest will be returned to the permittee by the Department. The Department will report interest earned on the certificate to the IRS under the applicant's Federal ID Number. Your financial institution must provide 1099-INT for interest earned on this certificate. All statements should be sent to the address below. The Department of Environmental Quality is the sole beneficiary of the account. Redemption and disposition is to be authorized exclusively by the Department through written instructions on Department letterhead. All customer documents relating to the CD should be provided to the Department. Questions regarding these requirements may be addressed to Permits and Bonding Unit at (517) 241-1528. FINANCIAL INSTITUTION CERTIFICATION "I state that Certificate of Deposit #_ _ 3851-1120281-3 , issued by Comerica Bank , has been issued according to the instructions listed above." Address of financial institution issuing officer's name Sharon R Taylor Title Signature Date ACCEPTANCE OF CERTIFICATE OF DEPOSIT AS CONFORMANCE BOND To the permittee: Fill in the blanks below with the permittee's name, Certificate of Deposit (CD) number, CD amount, bank name, and well name and number. Sign and date where indicated. By signature below, the parties accept the following agreement: It is agreed between the State of Michigan, Department of Environmental Quality and ENERGEX TROLEUM (USA) LLC hereafter the permittee, that Certificate of, 385111202813 in the amount of \$ 25,000 , issued by _in the name of and for the benefit of the State of Michigan, Supervisor of Wells, Department of Environmental Quality, is accepted as a conformance bond required by PART 615 SUPERVISOR OF WELLS, 1994 PA 451, as amended, Section 324.61506(p) for the well known as PERMIT #32366 Melvin F2-12 and shall be available to the State of Michigan for all purposes for which the bond is required. It is the express intent of the parties that the Certificate of Deposit is a substitute for the filing of a conformance bond. It is further agreed that the Certificate of Deposit is subject to forfeiture, claim or return in like manner as a conformance bond. The permittee retains the right to any and all interest accruing to the Certificate of Deposit. Permitteé , Michigan Department of Environmental Quality

Date 2/19/13

Enclose with CD and submit to: Office of Oil, Gas, and Minerals, Michigan Department of Environmental Quality, P.O. Box 30256, Lansing, MI 48909-7756.

98-1088967

Permittee's Authorized Signature

Permittee's Federal ID Number_

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MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY - OFFICE OF GEOLOGICAL SURVEY

| · | | | | | |
|---|---------------------------------------|---------------------|------------------------------|---|-----------------------|
| REQUEST FOR TRANSFER OF PERMIT | Permit numbe | er Weil type Oil | i | Current true v | rertical depth |
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| Required by authority of Part 615 Supervisor of Wells or Part 625 | | | | | |
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| falsification of this information may result in fines and/or imprisonment | | | | | |
| Part 615 Oll/Gas Well Part 625 Mineral Well | | NE 1/4 SE | 1/4 5 | ection 12 | T5N R |
| ≥ Part 615 Oll/Gas Well Part 625 Mineral Well | Township | | | unty | |
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| NOTE: Eligibility for permits is conditioned upon compliance with the soft be transferred to persons not in compliance. A permit for a well standitions at the well site until compliance is achieved. The acquiring This permit does not convey property rights in either real estate rivate or public rights nor does it waive the necessity of seeking | permittee shall attach | a current Organiz | unger notice ation Report | because of the temperature of | insatisfactory 13) |
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| ante(s) or Saling Permittee(s) | | | ŗ | ed. 1.D.# or S | S # |
| inco Petroelum USA, Inc. | | - | | 34280793 | , O . |
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| 01 E. First St., Ste. 300, Imlay City, MI 48444-1311 | * | | | | |
| permits rights and responsibilities are discharged by: | | | | | |
| Dave 144 | | | | | |
| Permittee Authorized represer | itative name | | Signature | | Date |
| Permittee Authorized represen | itative name | | Signature | | Date |
| | | | | | Date |
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| TRANSFI | ER OF A PERMIT TO | | - 3.10-10-0 | · | Date |
| ne(s) of Acquiring Permittee(s): | art of AT Crown 1 | <i>y.</i> | Fe | d. I.D.# or S.S | |
| eroex Petroleum (USA) LLC | | | | | 2-17 |
| ress: Number and Street, City or Town, State, ZIP Code | · · · · · · · · · · · · · · · · · · · | ···· | <u>98</u> | 1088967 lephone | |
| S East Ash, Mason, Michigan, 48854 | | | 51 | 9-252-1800 | |
| eare) (I am) an owner or authorized representative of the owner of the notion and orders | e well under this permit | t and assume full | responsibilit | y for the drillin | n operation o |
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| ergex Petroleum (USA) LLC Peter Bilodeau Permittee Authorized represents | itive name | End's | gnature | 2/ | /19/2013 Date |
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| The bottom of the contract of | | | _Y Distributi | ion by DEQ | * |
| FOR DEPARTMENT OF ENV | | | LY | sing 🗌 Sel | ling Owner |

| By authority of Part 615, Supervisor of Wells, Act 451 PA 1994, as amende | 4 AND TOTAL |
|--|---|
| CERTIFICATE OF DEPOCIT PROJUDITATIVES FOR AN | |
| | LBUNUS |
| certifies that the Certificate has been issued according to the following requirements: | e below, the bank's issuing officer |
| 1 1/2 CD III.SUBERINE SDIR COMPONE State of Machines Documents of the Component of the Comp | mental Quality |
| 2. The account should show the State of Mindle of Mindle as bellenciary, payee, in care of, joint fel | nant, etc. |
| 3. In order to comply with the LISA Patriot Act, authorized John Landson Number 38-5000134 and r | no other, |
| account cards if delivered to them. However, Department employees cannot furnish their Social Secuidentification number such as employee identification number such as employee identification number such as employee. | and return signature cards or |
| identification number such as employee identification number must be utilized. The customer shall recount cards. | my number. An alternative |
| 4. The maturity date shall not be long than and (4) | or aith siditatrie cards of |
| | - |
| Interest must be paid by check at maturity. The interest will be returned to the permittee by the Department will report interest earned on the certificate to the IRS under the applicant's Federal I. Your financial institution must provide 1090 INT for interest earned on the Control of the IRS under the applicant's Federal I. | tment. |
| Your financial institution must provide 1099-INT for interest earned on this certificate. All statements s. The Department of Environmental Quality is the sole beneficiary of the account. Bedeuts in the second of the account of the account of the account. | O Number, |
| The Department of Environmental Quality is the sole beneficiary of the account. Redemption as authorized exclusively by the Department through written instructions on Department. | nould be sent to the address below. |
| authorized exclusively by the Department through written instructions on Department letterhea 9. All customer documents relation to the CD should be written instructions on Department letterhea | d. |
| The state of the s | |
| TEINANI IN INCITITION OF THE CONTINUE TO THE C | 1528, |
| 1 1 State that Contitionts of December 1 1 State 1 1 At 11 A | |
| issue | d by |
| Comerica Bank | |
| , has been issued according to the | instructions listed above " |
| Issuing officer's name Sharon R Taylor Address of financial inst | itution |
| resulting officer's flatfie | |
| Title Viac Proof last | <u>.</u> |
| InteVice President | . Marie symmetric services and services are services and services and services and services are |
| Charles Doland | |
| Signature / Statuton & Gullor | |
| | |
| Date02//2//3 | |
| | |
| ACCEPTANCE OF CERTIFICATE OF DEPOSIT AS CONFORMANCE To the permittee: Fill in the blanks below with the permittee's page 2. | |
| To the permittee: Fill in the blanks below with the permittee's name, Certificate of Deposit (CD) number, CD amount number. Sign and date where indicated. By signature below, the garries accept the following agreement. | EBOND |
| and number. Sign and date where indicated. By signature below, the parties accept the following agreement: | it, bank name, and well name |
| and the state of t | · |
| It is agreed between the State of Michigan, Department of Environmental Quality and | (n |
| O Environmental Quality and 20 | ERGEX |
| PETROLFUM (USA) //C | |
| PETROLEUM (USA) LLC hereafter the permitte | e, that Certificate of |
| Deposit # 385111203514 in the amount of \$ 25.000, issued by Co | |
| in the amount of \$ 3.000, issued byCo | MERICA |
| KANIN | |
| Supervisor of Wells, Department of Environmental Quality in accounted an and for the benefit of | the State of Michigan |
| Supervisor of Wells, Department of Environmental Quality, is accepted as a conformance bond SUPERVISOR OF WELLS, 1994 PA 451, as amended. Section 334 61505(a) for the benefit of | required by DADT and |
| SUPERVISOR OF WELLS, 1994 PA 451, as amended, Section 324.61506(p) for the well known | an as Pos as It d 305 |
| In soite the same of the same | WI COXCRINI # 32341 |
| bond is required. It is the express intent of the parties that the Certificate of Deposit is a substi- | |
| bond is required. It is the express intent of the parties that the Certificate of Deposit is a substitution of the parties of Deposit is a substitution of Deposi | purposes for which the |
| Conformance bond. It is turther agreed that the Certificate of Donnetting and in the certificate of Donnetting and Indiana. | une for the filing of a |
| manner as a comprimance bond. The permittee retains the right to sow and all interesting, cla | ım or return in like |

manner as a conformance bond. The permittee retains the right to any and all interest accruing to the Certificate of

Michigan Department of Environmental Quality

DEQ Authorized Signature

Enclose with CD and submit to: Office of Oit, Gas, and Minerais, Michigan Department of Environmental Quality, P.O. Box 30256, Lansing, MI 48909-7756.

Permittee's Authorized Signature

Permittee's Federal ID Number 98-10889

Permitte

| REGUEST FOR TRA | NSFER OF PERMIT | Permit number | Well type | Current true | vertical depth |
|--|---|----------------------------|--------------------------------------|-------------------------------------|-----------------------|
| MEGOLDI FOR IRA | MOLEK OF PEKMII | 39257 | Oil | 4390 | |
| Required by authority of Part 615 | Supervisor of Wells or Part 625 | Well name and num | | | |
| ivilneral vveils, Act 451 PA 1994 as : | amended Non-cubmicsion and/or | Lanphar, Melivn | F 7-12 | | |
| falsification of this information may re | asult in fines and/or imprisonment. | Surface location | | | |
| Pari 615 Oil/Gas Well | I | SE 1/4 NW | 1/4 SE 1/4 | 4 Section 12 | T5N R1 |
| KZ Fart 610 Oli/Gas Well | Part 625 Mineral Well | Township | | County | |
| NOTE: Eligibility for normite to a series | | Addison | | Oakland | |
| NOTE: Eligibility for permits is condition not be transferred to persons not in co- conditions at the well site until complian. This permit does not convey proper private or public rights nor does it we | ince is achieved. The acquiring perm | Ittee shall attach a curri | ent Organization Re | alice because of port (EQP 7200- | unsatisfactory 13) |
| · · | | A PERMIT FROM: | | The state seat | *163. |
| Vame(s) of Selling Permittee(s) | | TET DECEMBER 1 1 (COM). | | Fed. I.D.# or | D D 44 |
| Onco Petroleum USA, Inc. | | | | 134280793 | |
| Address: Number and Street, City or To | own, State, ZIP Code Telephone | | | 134200793 | |
| 301 E. First St., Ste. 300, Imlay | City. MI 4844-1311 | | | | |
| , | 3, , , | | | | |
| | | | | | |
| d permits rights and responsibilities ar | a discharged by | | | | - |
| 2 | o alsonargas by. | | | | |
| | | | | | |
| Permittee | Assistanting of an artist | | | | • |
| · wiring | Authorized representative | name | Signatur | re | Date |
| | • | | | | |
| | | | | | |
| Permittee | Authorized representative | name | Signature | re | Date |
| | | | • | _ | pale |
| | | | | | |
| Permittee | Authorized representative | name | Signature | 6 | 5. |
| | TRANSCER | C A DEDNAMETO | Old Istal | · | Date |
| me(s) of Acquiring Permittee(s): | <u> </u> | F A PERMIT TO: | | | |
| pergex Petroleum (USA) LLC | | | | Fed. I.D.# or S. | S.# |
| dress: Number and Street, City or Tov | wn. State ZIP Code | | | <u>98-1088967</u> | |
| 6 East Ash, Mason, Michigan, | | | | Telephone | |
| o case Asii, iviasbit, ividilidait | 40004 | | | | |
| e are) (Lam) an owner or authorized s | Corporate Fue of the control of the | | | | |
| e are) (I am) an owner or authorized re andonment in conformity with the law, | spresentative of the owner of the well | under this permit and a | issume fuli responsi | ibility for the drilli | ng, operation, an |
| ND: Single Well | 3 austra and at a a a a a | | • | | |
| Blanket | - | rica Bank | | | |
| Statement of Financial R | | 1-1120352-2 | _ Amount\$2 | 5,000.00 | |
| NEDDELING TO MEMBER SHOW THE PROPERTY OF THE P | esbousipility | , | / V) | | |
| permittee rights and responsibilities ar | e assumed by: | | - // | | 1 7 |
| | | . 1 | 14 | | |
| ergex Petraleum (USA) LLC | Peter Bilodeau | 1/02 | 477 | | 2/19/22 |
| Permittee | Authorized representative r | iame (FV) | Signature | | Data |
| | | 2 | . | | 2 Date |
| | | | | | |
| | | | | | |
| Permittee | Authorized representative in | ame | Signature | | D-÷- |
| Permittes | Authorized representative in | | Signature | | Date |
| Permittes | Authorized representative in | ame | Signature | | Date |
| Permittee Permittee | | 3 | · | | |
| Permittee | Authorized representative n | j ame | Signature | | Date Date |
| Permittee | | j ame | Signature | | |
| Permittee | Authorized representative n | j ame | Signature / USE ONLY / Distri | ibution by DEQ | Date |
| Permittee | Authorized representative n | j ame | Signature / USE ONLY Distri | | Date |
| Permittee F | Authorized representative n | j ame | Signature / USE ONLY / Distri | ansing 🗌 Se | Date Bling Owner |
| Permittee F | Authorized representative no | ame NMENTAL QUALITY 2/19 | Signature / USE ONLY / J0/3 Distri | ansing 🗌 Se | Date |

By authority of Part 615, Supervisor of Wells, Act 451 PA 1994, as amended.

| | CERTIFICATE OF DEPOSIT REQUIRE To the financial institution: The financial institution of the financial | MENTO FOR OUR MENTO |
|------|--|--|
| | To the financial institution: The financial institution will supply its own Certific certifies that the Certificate has been issued according to the following regularent | THE INTERIOR OIL WELL BONDS |
| | certifies that the Certificate has been issued according to the following requirem | pents: |
| | " " " OD DIEGO DE IN THE SIME HOME OF STORE AT MARIETE A | of the transmission of the contract of the con |
| | No other name may be connected with the certificate as benefit The account should show the State of Merbigan Federal Tay Marsh | lary, payee, in care of, joint tenant, etc |
| Ī | 2. The account should show the State of Michigan Federal Tax Identifies 3. In order to comply with the USA Patriot Act, authorized delegation. | cation Number 38-6000134 and no other, |
| - | account cards if delivered to them. However, and introduced delegates of | the Supervisor of Wells can sign and return signafure cords or |
| j | account cards if delivered to them. However, Department employees identification number such as employee identification number must be account cards. | cannot turnish their Social Security number. An afternative |
| 1 | account cards. | o usiced, the customer shall not sign signature cards or |
| 1 | 4. The maturity date shall not be less than one (1) year. The certificate 5. Interest must be paid by check at maturity. The interest will be called a state of the control of the contro | Shall be automatically renounce |
| . [| Interest must be paid by check at maturity. The interest will be returned. The Department will report interest earned on the confidence to the local control of the | ed to the permittee by the Denartment |
| | The Department will report interest earned on the certificate to the IR Your financial institution must provide 1000-INT for interest earned. | S under the applicant's Federal ID Number |
| | Your financial institution must provide 1099-INT for interest earned on The Department of Environmental Quality is the sole beneficiary | this certificate. All statements should be sent to the address below |
| - 1 | BUINGFIZED exclusively by the Denastment then to be a series of the contract o | and disposition is to be |
| | 9. All customer decliments relating to the CD charles by | Arons on Department letterhead. |
| - | | 5 80d Sonding Unit of (517) Oder Appa |
| 1 | | 5 876 501(a) (g. 011(a) (517) 241-1528; |
| | "I state that Certificate of Deposit # 3851-1120 | |
| | The same of the sa | 293-9, issued by |
| | Comerica Bank has be | |
| | , nas de | en issued according to the instructions listed above." |
| 1 | ssuing officer's name Sharon R Taylor | Address of financial institution |
| | occurs delice a liquidpilaton_k_laylor | |
| 1 - | itle Viac Broodlant | |
| 1. | Wice President | |
| | Blazin Ada a | |
| S | ignature Nation X (little) | |
| | | |
| D | ate | |
| | | |
| | ACCEPTANCE OF SECTION | |
| То | ACCEPTANCE OF CERTIFICATE OF DEPO | SIT AS CONFORMANCE BOND |
| jan | the permittee: Fill in the blanks below with the permittee's name, Certificate of number. Sign and date where indicated. By signature below, the parties accept | Deposit (CD) number, CD amount, bank name, and well name |
| | and a supplied the parties accept | of the following agreement: |
| de t | 7 mmn - 3 f | and the second of the second o |
| II. | s agreed between the State of Michigan, Department of Environr | nental Quality and FNER (55) |
| 1/ | PETROLEUM (USA) LLC | Total details and |
| 11 | ETROLEUM (USA) LLC | horaofta-ih- |
| | | hereafter the permittee, that Certificate of, |
| De | posit # _385111202839 in the amount of \$ _25.00 | 1 186. |
| 1 | n the amount of \$ 25,00 | sued by LomeRICA |
| | (A 0 . 12) | |
| Sur | in the name | ne of and for the benefit of the State of Michigan, |
| Cit | un the name pervisor of Wells, Department of Environmental Quality, is accept PERVISOR OF WELLS, 1994 PA 451, as amended, Section 324 | ed as a conformance hond maying the page. |
| 301 | PERVISOR OF WELLS, 1994 PA 451, as amended, Section 324 | 61506(n) for the well known |
| 1 | 11/2 1/2 | 10 TOO O(P) TO THE WEIL KNOWN AS TERM # 32,579 |
| سا | MORRIS 9+12 and shall be something in | - |
| bon | d is required. It is the express intent of the parties that the a | e State of Michigan for all purposes for which the |
| cont | formance bond. It is further agreed that the Continue of the | cate of Deposit is a substitute for the filing of a |
| mar | formance bond. It is further agreed that the Certificate of Depositioner as a conformance bond. The permittee retains the right to a | is subject to forfeiture, claim or return in like |
| Den | ner as a conformance bond. The permittee retains the right to a osit. | ny and all interest accruing to the Certificate of |
| | | 3 and an animate of |
| rem | nittee Michiga | Department of Environmental Quality |
| Po. | (1/1) | In Internal Quality |
| Ву | Date 12/13 By | 60 /11 |
| | Permittee's Authorized Signature | Date 0/19/13 |
| | | DEQ Authorized Signature |
| Perm | hittee's Federal ID Number 98 - 1088967 | |
| | | |
| | | |

Enclose with CD and submit to: Office of Oil, Gas, and Minerals, Michigan Department of Environmental Quality, P.O. Box 30256, Lansing, MI 48909-7756,



STATE OF MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY LANSING



DAN WYANT DIRECTOR

February 4, 2014

Mr. Peter Bilodeau Energex Petroleum (USA), L.L.C. 2105 Victoria Avenue Windsor, Ontario N8X 1P8

Dear Mr. Bilodeau:

SUBJECT:

TRANSFER OF PERMIT APPROVAL

The Department of Environmental Quality, Office of Oil, Gas, and Minerals (OOGM), approved your request for transfer of permit pursuant to Part 615, Supervisor of Wells, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended, for the following permits:

| Well Name & Number | Permit Number | Township | County |
|--------------------|---------------|----------|-----------|
| Stoltz 2-24 | 24616 | Columbus | St. Clair |
| Marcinkiewicz 2-24 | 24615 | Columbus | St. Clair |
| Ross Unit 1-31 | 30518 | Bruce | Macomb |
| Jones Unit 1-30 | 29994 | Bruce | Macomb |

The bond and permit records have been updated. A copy of the approved transfer request is enclosed.

If you have any questions, please contact me by phone at 517-284-6837, by e-mail at pettitj@michigan.gov, or by mail at Department of Environmental Quality, Office of Oil, Gas, and Minerals, P.O. Box 30256, Lansing, Michigan 48909.

Sincerely,

Joe Pettit

Permitting and Technical Services Section

Office of Oil, Gas, and Minerals

Enclosure

cc:

Mr. Jack Lanigan, DEQ

Mr. Lou Schineman, DEQ

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY - OFFICE OF GEOLOGICAL SURVEY

| · | | | | | |
|---|--|--|---|--|------------------|
| REQUEST FOR TRAN | ISEED OF DEDMIT | Permit number 29994 | Well type Natrual Gasl | Current true vertice 4025' | al depth |
| REGOEDT OR TRAIN | OF ER OF FERMIT | Well name and numb | | 14020 | |
| Required by authority of Part 615 Su | pervisor of Wells or Part 625 | 1 | Jer | | |
| Mineral Wells, Act 451 PA 1994 as am | ended. Non-submission and/or | Jones Unit 1-30 | *************************************** | | |
| falsification of this information may resu | ilt in fines and/or imprisonment. | Surface location | | | |
| N | | SE 1/4 SW | 1/4 SW 1/4 | Section 30 T | 5N R 12E |
| Part 615 Oll/Gaş Well | Part 625 Mineral Well | Township | | County | |
| NOTE FRANCE A VI | | Bruce | | Macomb | |
| NOTE: Eligibility for permits is conditioned not be transferred to persons not in compliant conditions at the well site until compliant. This permit does not convey propert private or public rights nor does it was | orance. A permit for a well shall no be is achieved. The acquiring perm y rights in either real estate or ma | it be transferred if the p ittee shall attach a cum aterial nor does it auti | ermittee is under not ent Organization Rep horize any injuny to | lice because of unsation (EQP 7200-13) | atisfactory |
| Alexada) of Oalisa in the Alexada | TRANSFER OI | F A PERMIT FROM: | | • | |
| Name(s) of Selling Permittee(s) | • | | | Fed. I.D.# or S.S. | # |
| Onco Petroleum USA, Inc. | | | | 134280793 | |
| Address: Number and Street, City or Tov | | | | - | |
| 301 E. First St., Ste. 300, Imlay C | City, MI 48444-1311 | | | | |
| All permits rights and responsibilities are | discharged by: | | | | |
| Permittee | Authorized representative | e name | Signatur | re | Date |
| Permittee | Authorized representative | е лате | Signatur | re | Date |
| Permittee | Authorized representative | e name | Signatur | re | Date |
| NI (A) (A) | TRANSFER (| OF A PERMIT TO: | | | |
| Name(s) of Acquiring Permittee(s): | | | | Fed. I.D.# or S.S. | ¥ |
| Energex Petroleum (USA) LLC | | | | _98-1088967 | |
| Address: Number and Street, City or Tow | n, State, ZIP Code | | | Telephone | |
| 2105 Victoria Ave Windsor. Onta | ario N8X 1P8 | | | 519-252-1800 | |
| (We are) (I am) an owner or authorized re abandonment in conformity with the law, i | epresentative of the owner of the we regulations and orders. | ell under this permit and | assume full respons | sibility for the drilling | , operation, and |
| BOND: Single Well Attacl | hed Surety or Bank Con | nerica Bank | | 1 | |
| ⊠ Blanket ☐ On Fi | | | Amount | / | |
| ☐ Statement of Financial R | | | — ///odir_/// | | |
| All permittee rights and responsibilities ar | | | / Wa | 1 | |
| | o dosumou by | | [M(1) | <i> </i> | 1 / |
| Energex Petroleum (USA) LLC Permittee | Peter Bilodeau Authorized representative | e name | Signatur | e / | Date 7/14 |
| Permittee | Authorized representative | e name | Signatur | e | Date |
| Permittee | Authorized representative | name | Signatur | e | Date |
| | OR DEPARTMENT OF ENVIR | ONMENTAL QUALI | TY USE ONLY | | |
| | | | / Dis | stribution by DEQ | |
| approved | DAJ | <i>2/</i> . | ' - / 1 · 1 · - | | lling Owner |
| | Signature | n: | até 🗆 | | quiring Owner |
| | and the same of th | | | | 7 |
| • | | | - | | |
| QP 7200-7 (rev. 8/2004) Mail Origina | al and 3 copies to: OFFICE OF | GEOLOGICAL SURVE | Υ | | |

DEQ

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY - OFFICE OF GEOLOGICAL SURVEY

| | | Permit number | Well type | Current true vertica | 1 -5 1 |
|--|---|--|---|--|----------------|
| REQUEST FOR TRAN | ISFER OF PERMIT | 30518 | Gas | 3903' | i depin |
| | | Well name and num | | 1 0 0 0 0 | |
| Required by authority of Part 615 St | pervisor of Wells or Part 625 | Ross, Lorne Uni | | | |
| Mineral Wells, Act 451 PA 1994 as an falsification of this information may res | 16лаеа. Non-submission and/or | Surface location | (1-01 | | |
| The state of the s | on miles anotor imprisorment. | 1 | A NO. A NO. A NO. | | |
| Part 615 Oil/Gas Well | Part 625 Mineral Well | | | Section 31 T 5 | N R 12E |
| ZZ FOROTO OTEGAS WER | ☐ Fall 625 Mineral Well | Township | 1 | County | |
| NOTE: Eligibility for permits is conditional | ed tipos compliance with the statut | Bruce | | Macomb | |
| NOTE: Eligibility for permits is condition not be transferred to persons not in comconditions at the well site until compliand. This permit does not convey propert private or public rights nor does it was | ce is achieved. The acquiring permity rights in either real estate or m | ittee shall attach a cur aterial por does it au | permittee is under no rent Organization Re | otice because of unsate eport (EQP 7200-13) | tisfactory |
| | | F A PERMIT FROM | | | |
| Name(s) of Selling Permittee(s) | | 7 7 G EIWHI EIROM | | Fed. I.D.# or S.S.# | |
| Onco Petroleum USA, Inc. | | | | 134280993 | |
| Address: Number and Street, City or Tov | wn, State, ZIP Code Telephone | | | 104200993 | ···· |
| 301 E. First St. Ste. 300 | , | | | | |
| Imlay City MI | | | | | |
| 4844-1311 | | | | | |
| All permits rights and responsibilities are | discharged by: | | | | |
| , | and and any | | | | |
| | | | | | |
| Permitiee | Authorized representativ | re name | Signate | иге | Date |
| Permittee | Authorized representativ | e name | Signati | ure' | Date |
| Permittee | Authorized representativ | | Signatu | ıre | Date |
| Name(s) of Acquiring Permittee(s): | TRANSFER (| OF A PERMIT TO: | | | |
| - ' ' | | | • | Fed. I.D.# or S.S.# | |
| Energex Petroleum (USA) LLC Address: Number and Street, City or Tov | m State 710 Code | | | 98-1088967 | |
| | | | | Telephone | |
| 2105 Victoria Ave., Windsor. Ont | ario N8X 1P8 | | | 519-252-1800 | |
| (M/o aro) (I am) on our results (| | | | | |
| (We are) (I am) an owner or authorized nabandonment in conformity with the law, | apresentative of the owner of the wi | elf under this permit ar | id assume full respor | nsibility for the drilling, | operation, and |
| 00N0 C3 61 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | [|
| | | mmerica Bank | | | |
| _ | | | Amount | | |
| ☐ Statement of Financial F | responsibility | | | | |
| All permittee rights and responsibilities a | re assumed by: | / | | | , |
| _ | | / | 11/1 | () | /.] |
| Energex Petroleum (USA) LLC | Peter Bilodeau | (4 | K/M | - k | ~8 /19 1 |
| Permittee | Authorized representative | e name | Signatu | rre // | Date |
| • | • | | | 0 | |
| | | | | | |
| Permittee | Authorized representative | e name | Signatu | ıre | Date |
| | | | | | Date |
| | | | | | |
| Permittee | Authorized representative | e name | Signatu | Iro | Data |
| | | | | | Date |
| | FOR DEPARTMENT OF ENVIR | TONIVIEW LAL QUAL | INY USE ONLY | Noteibutton by Para | |
| Approved | TI | 73 | | Distribution by DEQ | , , |
| | Signature | | 7 | | ing Owner |
| | Signature | | Date L | Field Acq | ulring Owner |
| | | | | | |
| | | | | | |
| QP 7200-7 (rev. 8/2004) Mail Orlgin | al and 3 copies to: OFFICE OF | GEOLOGICAL SURV | | | |
| Visit Sizes I/ Wall Offdit | Service of Contract City Contract City | GEOLOGICAL STUDIA | Y | · · · · · · | |

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MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY - OFFICE OF GEOLOGICAL SURVEY

| | | Permit number | Well type | Current true vi | ortical danth |
|--|--|---|---|---|-----------------------|
| REQUEST FOR TRAI | NSFER OF PERMIT | 24615 | Oil | 2913' | erocar deprin |
| | | Well name and nun | | 12010 | |
| Required by authority of Part 615 S Mineral Wells, Act 451 PA 1994 as ar | upervisor of Wells or Part 625 | Marcinkiewicz, I | | | |
| falsification of this information may res | ult in fines and/or imprisonment. | Surface location | <u> </u> | | |
| | _ | NW 1/4 NE | 1/4 SE 1, | 4 Section 24 | T5N R15E |
| 🛛 Part 615 Oil/Gas Well | Part 625 Mineral Well | Township | | County | |
| NOTE: Eligibility for pormits is as altis- | 31 | Columbus | | St. Clair | |
| NOTE: Eligibility for permits is condition not be transferred to persons not in com- conditions at the well site until complian. This permit does not convey proper private or public rights nor does it was | ce is achieved. The acquiring perm ty rights in either real estate or m | ot be transferred it the littee shall attach a cur aterial por does it au | permittee is under r rent Organization R | notice because of a eport (EQP 7200- | unsatisfactory 13) |
| Name (a) of Calling Day | TRANSFER O | F A PERMIT FROM | : | | |
| Name(s) of Selling Permittee(s) Onco Petroleum USA, Inc. | | | | Fed. I.D.# or : | |
| Address: Number and Street, City or To | um Stato 719 Codo Tologhama | | | 134280893 | . |
| 301 E. First St. Ste 300, | wit, State, ZIF Code Telephone | * * | | | |
| Imlay City MI | | | | | |
| 484-1311 | | | | | |
| All permits rights and responsibilities are | discharged by: | | | | |
| | | | | | |
| P3 *** | | | | | |
| Permittee | Authorized representativ | е пате | Signa | ture | Date |
| | | | | | |
| Permittee | Aritharizad santaganiativ | | | | |
| · onnaco | Authorized representative | e name | Signal | ure | Date |
| | | | | | |
| Permittee | Authorized representative | e name | Signat | TIFO. | Date |
| | | OF A PERMIT TO: | 0.9100 | | Date |
| Name(s) of Acquiring Permittee(s): | - ((A)(O) L)((| N AFERMITIO. | | Fed. I.D.# or S | S.S.# |
| Energex Petroleum (USA) LLC | | | | 98-1088967 | 1 |
| Address: Number and Street, City or Tov | the state of the s | | | Telephone | |
| 2105 Victoria Ave., Windsor, Ont | ario N8X 1P8 | | | 519-252-18 | 00 |
| (We are) (Lam) an owner or authorized a | presentative of the ourser of the | No construction of the second | | | |
| (We are) (I am) an owner or authorized nabandonment in conformity with the law, | regulations and orders. | all under this permit an | id assume full respo | nsibility for the dri | lling, operation, and |
| BOND: Single Well Attac | | Commerica Bank | | <u></u> | |
| 🖾 Blanket 🔲 On F | | | Amount | // | |
| ☐ Statement of Financial F | Responsibility | | /_// | | _ |
| All permittee rights and responsibilities ar | re assumed by: | | - 1 1/1 | カ | |
| | | | | / | 1 /11/ |
| Energex Petroleum (USA) LLC Permittee | Peer Bilodeau Authorized representative | | OW V | | fm 8/1 |
| | Addionzed representative | e italile | Signati | ure / | Date |
| | | | | · | |
| Permittee | Authorized representative | e name | Signati | ıra | Date |
| | • | | J.G. | | Date |
| · | | | | | |
| Permittee | Authorized representative | name | Signati | <i>i</i> re | Date |
| | FOR DEPARTMENT OF ENVIR | ONMENTAL QUAL | ITY USE ONLY | | |
| . / /, -/ | 1 | | | Distribution by DEC | |
| Approved 6 | | <u> </u> | | | Selling Owner |
| | Signature | | Paté [| Field . | Acquiring Owner |
| | | | | | |
| | | | | | : |
| QP 7200-7 (rev. 8/2004) Mail Origin | al and 3 copies to: OFFICE OF C | GEOLOGICAL SURVE | Y | | |

| REQUEST FOR TRANSFER OF PERMIT | 24616 | Well type Oil | The state of the s | | | | | |
|--|---------------------------|---------------------------------------|--|--|--|--|--|--|
| | Well name and num | .1 | 2914' | | | | | |
| Required by authority of Part 615 Supervisor of Wells or Part 625 Mineral Wells, Act 451 PA 1994 as amended. Non-submission and/or | Stoltz, J. Grant 2-24 | | | | | | | |
| falsification of this information may result in fines and/or imprisonment. | Surface location | | | | | | | |
| | NW 1/4 SW | 1/4 SE 1/4 : | Section 24 T 5N R 15E | | | | | |
| Part 615 Oil/Gas Well Part 625 Mineral Well | Township | · · · · · · · · · · · · · · · · · · · | Section 24 T 5N R 15E ounty | | | | | |
| NOTE: Eliability for | Columbus | 10 | | | | | | |
| NOTE: Eligibility for permits is conditioned upon compliance with the statutes, rules and orders of the Department of Environmental Quality. Permits shall not be transferred to persons not in compliance. A permit for a well shall not be transferred if the permittee is under notice because of unsatisfactory conditions at the well site until compliance is achieved. The acquiring permittee shall attach a current Organization Report (EQP 7200-13) This permit does not convey property rights in either real estate or material nor does it authorize any Injury to private property or invasion of private or public rights nor does it waive the necessity of seeking federal and local permits or complying with other state statutes. | | | | | | | | |
| TRANSFER | DF A PERMIT FROM: | | The State States, | | | | | |
| (variets) or Seining Fermittee(2) | ZI 13 (EKBIT I KOM) | | Fed. I.D.# or S.S.# | | | | | |
| Onco Petroleum USA, Inc. | | 134280893 | | | | | | |
| Address: Number and Street, City or Town, State, ZIP Code Telephone | | | | | | | | |
| 310 E. First St. Ste. 300 | | | i | | | | | |
| Imlay City MI 484-1311 | • | | | | | | | |
| All permits rights and responsibilities are discharged by: | | | | | | | | |
| The potential responsibilities are discrizinged by: | • | | | | | | | |
| | | | | | | | | |
| Permittee Authorized representati | Ve name | 0 | | | | | | |
| The second secon | NO HUITE | Signature | Date | | | | | |
| | • | | The state of the s | | | | | |
| Permittee Authorized representati | ve name | Signatura | | | | | | |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | r o riding | Signature | Date | | | | | |
| | | | | | | | | |
| Permittee Authorized representati | ve name | Signature | Date | | | | | |
| TRANSFER | OF A PERMIT TO: | | DBIG | | | | | |
| Maine(s) of Adquiring Permittee(s): | | <u></u> | Fed. I.D.# or S.S.# | | | | | |
| Energex Petroleum (USA) LLC Address: Number and Street, City or Town, State, ZIP Code | | | | | | | | |
| | | | Telephone | | | | | |
| 2105 Victoria Ave. Windsor. Ontario N8X 1P8 | | 519-252-1800 | | | | | | |
| (We are) (I am) an owner or authorized representative of the owner of the well under this permit and assume full responsibility for the drilling, operation, and abandonment in conformity with the law, regulations and orders | | | | | | | | |
| abandonment in conformity with the law, regulations and orders. | ven under this permit and | I assume full respons | bility for the drilling, operation, and | | | | | |
| BOND: Single Well Attached Surety or Bank Co | ommerica Bank | | ļ | | | | | |
| | TOTAL DATE | Aprount | | | | | | |
| Statement of Financial Responsibility | | _ //Journ_//_ | | | | | | |
| All permittee rights and responsibilities are assumed by: | | / /h | | | | | | |
| | • | | Λ / Λ | | | | | |
| Energex Petroleum (USA) LLC Peter Bilodeau | 1 | 11/1 U_ | (| | | | | |
| Permittee Authorized representative | ve name | Signature | Date | | | | | |
| , | | | // Date | | | | | |
| | | | | | | | | |
| Permittee Authorized representative | ve name | Signature | Date | | | | | |
| | | | | | | | | |
| Permittee Authorized representation | 1 | | ļ | | | | | |
| , tet on Egg yoph coentain | | Signature | Date | | | | | |
| FOR DEPARTMENT OF ENVIRONMENTAL QUALITY USE ONLY | | | | | | | | |
| Approved Approved | an. 1 | | tribution by DEQ | | | | | |
| | | 7 7 | Lansing Selling Owner | | | | | |
| Signature | D. | ate | Field Acquiring Owner | | | | | |
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| | | | 1 | | | | | |
| EQP 7200-7 (rev. 8/2004) Mail Original and 3 copies to: OFFICE OF | | | 1 | | | | | |

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